

**APPLICATION DATA SHEET****APPLICATION INFORMATION**

Application Type::

Regular

Subject Matter::

Utility

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

None

Computer Readable Form (CRF)?::

No

Number of copies of CRF::

Title::

Xanthine Derivatives, Their Preparation  
and Their Use In Pharmaceutical  
Compositions

Attorney Docket Number::

1/1386

Request for Early Publication?::

No

Request for Non-Publication?::

No

Total Drawing Sheets::

0

Small Entity?::

No

Petition included?::

No

Secrecy Order in Parent Appl.?::

No

**APPLICANT INFORMATION**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Germany

Status::

Full Capacity

Given Name::

Frank

Family Name::

HIMMELSBACH

City of Residence::

Mittelbiberach

State or Province of Residence::

Country of Residence::

Germany

Street of mailing address::

Ahornweg 16

City of mailing address::

Mittelbiberach

State or Province of mailing address::

Page # 1

Initial 08/07/03

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Country of mailing address:: Germany  
Postal or Zip Code of mailing address:: 88441

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Elke  
Family Name:: LANGKOPF  
City of Residence:: Warthausen  
State or Province of Residence::  
Country of Residence:: Germany  
Street of mailing address:: Schloss 3  
City of mailing address:: Warthausen  
State or Province of mailing address::  
Country of mailing address:: Germany  
Postal or Zip Code of mailing address:: 88447

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany  
Status:: Full Capacity  
Given Name:: Matthias  
Family Name:: ECKHARDT  
City of Residence:: Biberach  
State or Province of Residence::  
Country of Residence:: Germany  
Street of mailing address:: Kirschenweg 7  
City of mailing address:: Biberach  
State or Province of mailing address::  
Country of mailing address:: Germany  
Postal or Zip Code of mailing address:: 88400

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Germany

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<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Michael
<b>Family Name::</b>	MARK
<b>City of Residence::</b>	Biberach
<b>State or Province of Residence::</b>	
<b>Country of Residence::</b>	Germany
<b>Street of mailing address::</b>	Hugo-Haering-Strasse 50
<b>City of mailing address::</b>	Biberach
<b>State or Province of mailing address::</b>	
<b>Country of mailing address::</b>	Germany
<b>Postal or Zip Code of mailing address::</b>	88400
<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	Germany
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Roland
<b>Family Name::</b>	MAIER
<b>City of Residence::</b>	Biberach
<b>State or Province of Residence::</b>	
<b>Country of Residence::</b>	Germany
<b>Street of mailing address::</b>	Bodelschwingstrasse 39
<b>City of mailing address::</b>	Biberach
<b>State or Province of mailing address::</b>	
<b>Country of mailing address::</b>	Germany
<b>Postal or Zip Code of mailing address::</b>	88400
<b>Applicant Authority Type::</b>	Inventor
<b>Primary Citizenship Country::</b>	Germany
<b>Status::</b>	Full Capacity
<b>Given Name::</b>	Ralf
<b>Family Name::</b>	LOTZ
<b>City of Residence::</b>	Schemmerhofen
<b>State or Province of Residence::</b>	

Page # 3

Initial 08/07/03

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**Country of Residence::** Germany  
**Street of mailing address::** Nelkenstrasse 21  
**City of mailing address::** Schemmerhofen  
**State or Province of mailing address::**  
**Country of mailing address::** Germany  
**Postal or Zip Code of mailing address::** 88433

**CORRESPONDENCE INFORMATION**

**Correspondence Customer Number::** 28501

**REPRESENTATIVE INFORMATION**

**Representative Customer Number::** 28501

**DOMESTIC PRIORITY INFORMATION**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	Non-Provisional of	60/409,258	September 9 2002

**FOREIGN PRIORITY INFORMATION**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
DE	102 38 470	08/22/2002	Yes

**ASSIGNEE INFORMATION**

**Assignee name::** Boehringer Ingelheim Pharma GmbH &  
Co. KG  
**Street of mailing address::** Binger Strasse 173  
**City of mailing address::** Ingelheim  
**State or Province of mailing address::**  
**Country of mailing address::** Germany  
**Postal or Zip Code of mailing address::** 55216

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